

3  
O I P E  
Practitioner's Docket No. 35010.126  
JUL 17 2001

PATENT

**COMBINED DECLARATION AND POWER OF ATTORNEY**

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,  
CONTINUATION, OR C-I-P)

As a below named inventor, I hereby declare that:

**TYPE OF DECLARATION**

This declaration is for an original application.

**INVENTORSHIP IDENTIFICATION**

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor (*if only one name is listed below*) or an original, first and joint inventor (*if plural names are listed below*) of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

**TITLE OF INVENTION**

PRODUCT SELECTION OVER A COMMUNICATION NETWORK

**SPECIFICATION IDENTIFICATION**

which was filed on April 30, 2001, as Application No. 09/845,149.

**ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR**

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56, and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent.



## POWER OF ATTORNEY

I hereby appoint, individually and collectively, the practitioners associated with the Customer Number provided below as my/our attorney or agent with full power of substitution and revocation, to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith:

### CUSTOMER NUMBER: 28286

I hereby appoint the practitioners associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

---

SEND CORRESPONDENCE TO:  
**CUSTOMER NO. 28286**

DIRECT TELEPHONE CALLS TO:  
**Michael J. Setter (303) 546-1300**

---

## DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## SIGNATURES

John R. Bugarin  
**Inventor's signature** \_\_\_\_\_  
**Date** \_\_\_\_\_ **Country of Citizenship** United States of America  
**Residence** Fort Collins, CO  
**Post Office Address** 5026 Alder Court, Fort Collins, CO 80526

---

James F. Mackin III  
**Inventor's signature** *James F. Mackin III* \_\_\_\_\_  
**Date** 5/10/01 **Country of Citizenship** United States of America  
**Residence** Louisville, CO  
**Post Office Address** 343 West Street  
Louisville, CO 80027



Practitioner's Docket No. 35010.126

PATENT

## COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,  
CONTINUATION, OR C-I-P)

As a below named inventor, I hereby declare that:

### TYPE OF DECLARATION

This declaration is for an original application.

### INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor (*if only one name is listed below*) or an original, first and joint inventor (*if plural names are listed below*) of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

### TITLE OF INVENTION

PRODUCT SELECTION OVER A COMMUNICATION NETWORK

### SPECIFICATION IDENTIFICATION

which was filed on April 30, 2001, as Application No. 09/845,149.

### ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56, and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent.



## POWER OF ATTORNEY

I hereby appoint, individually and collectively, the practitioners associated with the Customer Number provided below as my/our attorney or agent with full power of substitution and revocation, to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith:

**CUSTOMER NUMBER: 28286**

I hereby appoint the practitioners associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

---

SEND CORRESPONDENCE TO:  
**CUSTOMER NO. 28286**

DIRECT TELEPHONE CALLS TO:  
**Michael J. Setter (303) 546-1300**

---

## DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

John R. Bugarin  
**Inventor's signature**

Date 5/10/01

Residence Fort Collins, CO

Post Office Address 5026 Alder Court, Fort Collins, CO 80526

*Witnessed & notarized by Judy Ellis on May 10, 2001  
My commission expires Jan. 24, 2005*

James F. Mackin III  
**Inventor's signature**

Date \_\_\_\_\_

Country of Citizenship United States of America

Residence Louisville, CO

Post Office Address 343 West Street  
Louisville, CO 80027